



FOOD ESTABLISHMENT INSPECTION REPORT

Niko's Pizza Chicken & Ribs
294 N. Main St.
Uxbridge, MA 1569

Inspection Number	Date	Time In/Out	Inspection Type	Client Type	Inspector	
37083	2/12/20	3:46 PM 4:34 PM	Routine	Restaurant	J.Clarico	
Permit Number	Person In Charge	Variance	Priority	Priority f	Core	Score
2019-F032	Asem Ghobrial -		1	1	2	91

Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT = out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

Supervision		IN	OUT	NA	NO	COS	Protection from Contamination (Cont'd)		IN	OUT	NA	NO	COS	
1. PIC present, demonstrates knowledge, and performs duties		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		15. Food separated and protected	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Certified Food Protection Manager		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		16. Food-contact surfaces; cleaned & sanitized		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Employee Health		IN	OUT	NA	NO	COS	Time/Temperature Control for Safety		IN	OUT	NA	NO	COS	
3. Management, food employee and conditional employee knowledge, responsibilities and reporting		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		17. Proper disposition of returned, previously served,		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4. Proper use of restriction and exclusion		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		18. Proper cooking time & temperatures		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
5. Procedures for responding to vomiting and diarrheal events	1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		19. Proper reheating procedures for hot holding		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Good Hygienic Practices		IN	OUT	NA	NO	COS	20. Proper cooling time and temperature		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
6. Proper eating, tasting, drinking, or tobacco use		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		21. Proper hot holding temperatures		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
7. No discharge from eyes, nose, and mouth		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		22. Proper cold holding temperatures		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Preventing Contamination by Hands		IN	OUT	NA	NO	COS	23. Proper date marking and disposition		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
8. Hands clean & properly washed		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		24. Time as a Public Health Control; procedures & records		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
9. No bare hand contact with RTE food or a pre-approved		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Consumer Advisory		IN	OUT	NA	NO	COS	
10. Adequate handwashing sinks supplied and accessible		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		25. Consumer advisory provided for raw/undercooked food		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Approved Source		IN	OUT	NA	NO	COS	Highly Susceptible Populations		IN	OUT	NA	NO	COS	
11. Food obtained from approved source		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		26. Pasteurized foods used; prohibited foods not offered		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12. Food received at proper temperature		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food/Color Additives and Toxic Substances		IN	OUT	NA	NO	COS	
13. Food in good condition, safe & unadulterated		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		27. Food additives: approved & properly used		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14. Required records available: shellstock tags, parasite		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		28. Toxic substances properly identified, stored & used		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Repeat Violations Highlighted in Yellow								Conformance with Approved Procedures		IN	OUT	NA	NO	COS
								29. Compliance with variance/specialized process/HACCP		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Good Retail Practices

Safe Food and Water		IN	OUT	NA	NO	COS	Proper Use of Utensils		IN	OUT	NA	NO	COS
30. Pasteurized eggs used where required		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		43. In-use utensils: properly stored		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31. Water & ice from approved source		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		44. Utensils, equip. & linens: property stored, dried & handled		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Variance obtained for specialized processing methods		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		45. Single-use/single-service articles: properly stored & used		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Temperature Control		IN	OUT	NA	NO	COS	46. Gloves used properly		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Proper cooling methods used; adequate equip. for temp.		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Utensils, Equipment and Vending		IN	OUT	NA	NO	COS
34. Plant food properly cooked for hot holding		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		47. All contact surfaces cleanable, properly designed,		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Approved thawing methods used		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		48. Warewashing facilities: installed, maintained & used; test		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Thermometers provided & accurate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		49. Non-food contact surfaces clean		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Identification		IN	OUT	NA	NO	COS	Physical Facilities		IN	OUT	NA	NO	COS
37. Food properly labeled; original container		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		50. Hot & cold water available; adequate pressure		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination		IN	OUT	NA	NO	COS	51. Plumbing installed; proper backflow devices		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Insects, rodents & animals not present		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		52. Sewage & waste water properly disposed		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Contamination prevented in prep, storage & display	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		53. Toilet facilities: properly constructed, supplied, & cleaned		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40. Personal cleanliness		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		54. Garbage & refuse properly disposed; facilities maintained		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used & stored		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		55. Physical facilities installed, maintained & clean		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. Washing fruits & vegetables		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		56. Adequate ventilation & lighting; designated areas use		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						60. 105 CMR 590 violations / local regulations		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal

Inspector

PIC

Follow Up Required: ☐ Y Follow Up Date: _____

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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Employee Health

Procedures for Responding to vomiting and diarrheal events

5 2-501.11 Clean-up Vomiting & Diarrheal Events - Establishment -

Pf Need a spill kit *Code: A food establishment shall have procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter.*

Protection From Contamination

Food Separated and protected

15 3-302.11 (A)(2) Raw Animal Foods Separated from each other - Kitchen -

Pr Chicken uncovered *Code: Foods shall be protected from cross contamination by: Except when combined as ingredients, separating types of raw animal foods from each other such as beef, fish, lamb, pork and poultry during storage, preparation, holding, and display by: (a) Using separate equipment for each type, or (b) Arranging each type of food in equipment so that cross contamination of one type with another is prevented and (c) preparing each type of food at different times or in separate areas.*



Prevention of Food Contamination

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Cont. prevented during food prep., storage & display

39 3-305.11 Food Storage - Kitchen -

- C** Open bags of flour Code: Food shall be protected from contamination by storing food: in a clean dry location; where it is not exposed to splash, dust, or other contamination; and at least 6 inches off the floor.



39 3-305.11 Food Storage - Kitchen -

- C** Flour needs to be stored 6" off the floor Code: Food shall be protected from contamination by storing food: in a clean dry location; where it is not exposed to splash, dust, or other contamination; and at least 6 inches off the floor.



Check List

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

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UXBRIDGE BOARD OF HEALTH 2020 PRE-INSPECTION CHECKLIST

IN

PIC informed employees in verifiable manner of disease reporting

IN

Employees using barrier (i.e gloves, tongs, etc) when handling RTE foods?

IN

Employees eating/drinking in designated areas only. Drinks stored properly?

IN

Employees wearing clean uniform/proper hair restraints/fingernails maintained?

IN

Hand washing sinks have soap, paper towels, 100 water and trash bin?

IN

Wiping cloths stored properly and staff knowledgeable on testing

IN

Soap and sanitizing solutions at concentration and test strips available?

IN

Thermometers in all temperature holding units and available for testing food?

IN

Dish machines are working properly (wash temp/solutions per manufacturer)?

IN

Test strips and irreversible temp. devices used to confirm proper sanitization?

IN

Food deliveries are from approved sources, safely stored and transported?

IN

TCS / RTE foods are properly date marked?

IN

Clean-up of vomit and diarrheal events procedures and kit available?

OUT

If applicable, grease trap logs are maintained and available?

IN

If 25 seats or more, choke saving certificate(s) available?

NA

Check List Part 2

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

I REQUIRED SIGNAGE

IN

I "A copy of the last inspection report is available upon request."

IN

I Allergen Awareness Poster

IN

I Allergen Notice on menu and/or menu board

IN

I Current Town of Uxbridge Food Permit posted

IN

I Certified Food Protection Manager certificate posted

IN

I Allergen Awareness certificate posted

IN

I Handwashing signage

IN

I Consumer Advisory if raw or undercooked animal foods served as ready-to-eat

NA

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Temperatures

Area	Equipment	Product	Notes	Temps
Kitchen	Coke refrigerator	Coleslaw		36.5 °F
Kitchen	Pizza prep	Ham		41 °F
Kitchen	Pizza prep	Meatballs		36.5 °F
Walk-in	Cooler	Chicken		33.5 °F
Kitchen	Chest freezer 1	Steak		5 °F
Kitchen	Chest freezer 2	Diced bacon		7.5 °F
Kitchen	Upright freezer	Chicken		3 °F

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

Notes

Send me a picture of your bodily fluids clean up kit
Flour 6" off the floor
Keep all foods covered